

I hereby certify that this paper (along with any paper referred to as being attached or enclosed) is being deposited with the U.S. Postal Service on the date shown below with sufficient postage as First Class Mail, in an envelope addressed to: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

Dated: November 21, 2007

Signature:

(William A. DiBianca)

Docket No.: SPINE 3.0-437 CIPCIPCIPCIPCIPCON I  
(PATENT)

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

In re Patent Application of:  
Errico et al.

Application No.: 10/784,646

Filed: February 23, 2004

For: ARTIFICIAL INTERVERTEBRAL DISC  
TRIAL HAVING A CONTROLLABLY  
SEPARABLE DISTAL END

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: Group Art Unit: 3738  
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: Examiner: B. E.  
Pellegrino  
:  
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:

Commissioner for Patents  
P.O. Box 1450  
Alexandria, VA 22313-1450

AMENDMENT

Dear Sir:

In response to the Official Action mailed May 21, 2007, Applicants submit the following amendments and remarks.

11/26/2007 RFEKADU1 00000059 121095 10784646

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# AMENDMENT TRANSMITTAL LETTER

Docket No.  
SPINE 3.0-437 CIPCIPCIPCIPCIPCON I

Application No.  
10/784,646-Conf. #8184

Filing Date  
February 23, 2004

Examiner  
B. E. Pellegrino

Art Unit  
3738

Applicant(s): Joseph P. Errico, Michael W. Dudasik, and Rafail Zubok

Invention: ARTIFICIAL INTERVERTEBRAL DISC TRIAL HAVING A CONTROLLABLY SEPARABLE DISTAL END

## TO THE COMMISSIONER FOR PATENTS

Transmitted herewith is an amendment in the above-identified application.

The fee has been calculated and is transmitted as shown below.

CLAIMS AS AMENDED					
	Claims Remaining After Amendment	Highest Number Previously Paid	Number Extra Claims Present	Rate	
Total Claims	21	- 20 =	1	x 50.00	50.00
Independent Claims	2	- 3 =		x	
Multiple Dependent Claims (check if applicable) <input type="checkbox"/>					
Other fee (please specify):					
TOTAL ADDITIONAL FEE FOR THIS AMENDMENT:					50.00

☒ Large Entity

☐ Small Entity

☐ No additional fee is required for this amendment.

☐ Please charge Deposit Account No. \_\_\_\_\_ in the amount of \$ \_\_\_\_\_.  
A duplicate copy of this sheet is enclosed.

☐ A check in the amount of \$ \_\_\_\_\_ to cover the filing fee is enclosed.

☐ Payment by credit card. Form PTO-2038 is attached.

☒ The Director is hereby authorized to charge and credit Deposit Account No. 12-1095  
as described below. A duplicate copy of this sheet is enclosed.

☒ Credit any overpayment.

☒ Charge any additional filing or application processing fees required under 37 CFR 1.16 and 1.17.

William A. Di Bianca  
Attorney/Agent Reg. No.: 58,653

Dated: November 21, 2007

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Signature:

(William A. Di Bianca)